

**150 North 18<sup>th</sup> Avenue, Suite 540-A**

- Ben Bobrow announced that he has appointed Michael Ward as Vice-Chair of EMS Council.

#### **IV. ARIZONA DEPARTMENT OF HEALTH SERVICES DISCUSSION AND ACTION ITEMS:**

##### **A. Discussion on Open Meeting Laws and Committee Meetings**

- Dona Markley reported on changes in the Arizona Open Meeting Laws:
  - A quorum, unless otherwise defined in statute, is a simple majority of total membership established in statute. There is legislation pending that will modify quorum requirements (SB 1162). This senate bill will change the statute to be a majority of filled positions for the three statutory committees.
  - A “Call to the Public” is only for the use of the public (audience).
  - “Training or Education announcements” has been changed to “Summary of Current Events” and is an open call to EMS Council Members only. Council members shall not take any action on matters raised at this time.
  - There will no longer be sign-in sheets at the meetings. Only members will be listed on the minutes. Public and employee names will no longer be listed on the minutes.

##### **B. Report on Bureau of Emergency Medical Services (BEMS) Enforcement Program and Introduction of New BEMS Certification/Training/Enforcement Section Chief**

- Ben Bobrow introduced the new BEMS Certification/Training/Enforcement Section Chief, Ron Anderson. Ron Anderson distributed an Investigational Activity Summary. He briefly gave an overview of the Enforcement process.
- Ben Bobrow presented Dona Markley with a plaque in recognition of her outstanding public health service to the Bureau of Emergency Medical Services (EMS) for EMS Council, Medical Direction Commission (MDC) and the State Trauma Advisory Board (STAB).

#### **V. EMS Council Executive Committee:**

##### **A. EMS Council Executive Committee Meeting Report**

- Kay Lewis reported on the Executive Committee meeting held December 9, 2004:
  - Ben Bobrow discussed the SHARE Program and distributed material regarding the program.
  - The Department is not prepared at this time to consider the issue of Arizona Certified EMT-Paramedics Working in Health Care Institutions.
  - The Department has reviewed the request to conduct another Futures Forum and determined that Forums are most effective held every five to seven years.

##### **B. Report on Status of Arizona Certified EMT-Paramedics Working in Health Care Institutions**

- EMS Council's Education Committee, EMS Council and Medical Direction Commission (MDC) have previously discussed expanding the role and/or scope of practice of the paramedic to allow them to work in non-prehospital settings, both in the emergency department and in critical care. The Department has reviewed the request and it has determined that the role of the EMT Paramedic in settings other than pre-hospital would involve input from other licensing agencies, boards, and stakeholders. Any change in the scope of practice would require change in statute and rule. The rule priorities have already been set and the Department will not move forward at this time. Once the Trauma and Air Ambulance rules are completed, the Department will engage stakeholders in preliminary discussions to determine if there really is widespread support.
- A question was asked regarding the paramedics currently working in non-prehospital settings. It was recommended to encourage facilities that are hiring "paramedics" not to call them paramedics. The liability would then fall with the facility.

**C. Report on Status of EMS Futures Forum**

- EMS Council's Executive Committee has requested that the Bureau of EMS hold an EMS Futures Forum in 2005. The Department has reviewed the request and determined that such Forums are most effective held every five to seven years. The Department is in the process of working on some of the key initiatives from the December 2003 Forum. The Bureau remains committed to work collaboratively with the EMS and Trauma Community. The Bureau intends to actively participate in activities and meetings sponsored by the regional EMS Councils and community organizations.

**D. Discussion and Action on Legislation that May Impact Arizona EMS and Trauma**

- The Department has submitted the proposed trauma legislation (SB1134). This bill will authorize the Department to delegate authority to the American College of Surgeons (ACS) to conduct inspections and determine verification/designation. This piece is extremely critical to the current scheme of the draft rules for trauma center designation. There is not going to be a house bill only a senate bill. There has been widespread support for trauma verification/designation.
- Vicki Conditt and Sarah Harpring presented information and discussed the draft rules at the recent EMS Regional Council Meetings:
  - Northern Arizona Emergency Medical Services Council scheduled for January 7, 2005 was canceled due to weather conditions.
  - Western Arizona Council of Emergency Medical Services Meeting - January 13, 2005
  - Arizona Emergency Medical Services Council Meeting - January 19,

2005

- Southeastern Arizona Emergency Medical Services Council Meeting - January 25, 2005
- Phoenix - Public meeting to obtain oral comment on the draft rules - January 27, 2005. This will be held at ADHS, 150 North 18<sup>th</sup> Avenue, Room 540 A.
- Changes to quorum requirements, SB 1162 – would require a majority of those appointed. It sounds like it would not include the Chairperson and the Representative of Highway Safety as these are delegated positions. It was decided that the language should be amended to delegated and appointed.
- Clarification regarding the orange DNR Forms - copies do not need to be made on orange paper.

## **VI. OLD BUSINESS**

### **A. Update on and Discussion of Expanding Scope of Practice of EMT-Paramedics to Include Rapid Sequence Intubation**

- On January 23, 2004, MDC and EMS Council reviewed and accepted guidelines, protocols, and training requirements to establish RSI/MAI as an optional procedure for paramedics. Both committees recommended that the Department/Bureau of EMS initiate rulemaking to expand the scope of practice of the EMT-Paramedic to include the RSI/MAI as an optional procedure. Pending a determination by the Department, the RSI/MAI pilot project was allowed to continue.
- The recommendation to expand the scope of practice of the EMT-Paramedic to include RSI/MAI as an optional procedure is still under review by the Department.
- It was reported that there are agencies still doing this pilot project without any oversight from the Bureau. There was concern over published articles stating the complication rate is more significant than at first thought since this pilot project was started.
- Until the Department decides to approve the RSI pilot project, the agencies involved need to continue reporting.
- Ben Bobrow was asked to report on the status of this at the next meeting.

**Item:** Update on RSI Pilot Project/Revisit  
**Follow Up:** Agenda Item EMS Council  
**Who:** Ben Bobrow  
**When:** Next Meeting – April 22, 2005

### **B. Update on and Discussion of EMT-B Carrying and Administering Aspirin**

- The Department considered and accepted the recommendation and in June 2002, the Bureau of EMS amended R9-25-503, Exhibit 1 - Drug List to authorize EMT-Basics to carry and administer aspirin and to authorize BLS ambulances to carry aspirin.
- The Bureau's position is that:
  - An EMT-Basic may carry aspirin in an amount identified in R9-25-503, Exhibit 1, EMT-B Drug List.

- An EMT-Basic may administer aspirin only to adults suffering chest pain
- Administration of aspirin by an EMT-Basic is not an advanced procedure and does not require administrative or on-line medical direction
- The administration of aspirin to an adult suffering chest pain is considered comparable to assisting patients with prescribed and over-the-counter medications, which is within the EMT-Basic scope of practice

## **VI. NEW BUSINESS**

### **A. Discussion and Action on Expanding Scope of Practice of EMT-Basics to Carry and Administer Epinephrine**

- Dr. Gallagher stated that the Kansas epinephrine curriculum had previously been reviewed by PMD. PMD recommended that the training be modeled after the training adopted by the State of Kansas. Kay Lewis requested a copy of the curriculum. The curriculum will need to be modified to delete things that are not Arizona specific. For an EMT-Basic acting as an ambulance attendant, administration of EPI-PENS will be mandatory. If they are acting in another capacity, it will be optional. A question was asked if a certified EMT-Basic or Paramedic, as a private citizen on the scene, could assist a citizen by using an EPI-PEN. If the EMT-Basic or Paramedic has been trained to administer an EPI-PEN and has access to an EPI-PEN, he or she could facilitate its use.

A motion was made by John Gallagher and seconded by Kay Lewis to Expand the Scope of Practice for EMT-Basics to carry and administer epinephrine. **Motion carried.**

### **B. Discussion and Action on Revising A.A.C. R9-25-503, Exhibit 1 and Exhibit 2**

A motion was made by John Gallagher and seconded by Frank Walter to approve this agenda item as presented with no concentrations listed. **Motion carried.**

- It was recommended that Activated Charcoal be placed on the next agenda of the PMD Committee. There is new evidence stating that this is an ineffective drug and that there are possible complications.
- There was concern over the reporting mechanism for dosage errors in the field.

**Item:** Activated Charcoal  
**Follow Up:** PMD Committee  
**Who:** John Gallager  
**When:** February 17, 2005

- It was recommended that the dosage for Glucagon be changed to 5 mg and placed on the next agenda of the PMD Committee.

**Item:** Glucagon Dosage – change from 2 mg to 5 mg.  
**Follow Up:** PMD Committee  
**Who:** John Gallagher  
**When:** February 17, 2005

- It was recommended that the concentration for Epinephrine use for ETT be reviewed at the next PMD Committee meeting.

**Item:** Concentration for Epinephrine use for ETT  
**Follow Up:** PMD Committee  
**Who:** John Gallagher  
**When:** February 17, 2005

- Dona Markley thanked Janine Anderson and John Gallagher for their work on this document.

**C. Discussion and Action on Adopting Drug Profiles as Guidance Documents for:**

1. Dexamethasone
2. Diltiazem
3. Nalmefene HCl

A motion was made by John Gallagher and seconded by Mark Venuti to approve the drug profiles as guidance documents for Dexamethasone, Diltiazem and Nalmefene HCl with one additional correction on the Diltiazem profile. On page 1, delete the last line, “Use with caution in patients receiving oral beta block medications”, and replace with “beta blocker use”. **Motion Carried.**

**D. Discussion and Action on Cardiac Arrest, AED, and Acute Stroke Data Collection Initiative**

- Ben Bobrow introduced Lani Clark, the new BEMS Research and QA Director for the SHARE Program.
- Ben Bobrow reported that the Arizona Department of Health Services, Bureau of Emergency Medical Services, has established a registry to collect and analyze data pertaining to out-of-hospital cardiac arrest (OHCA). The program has been titled: Save Hearts in Arizona Registry and Education (SHARE).
  - The goal is to create a quantifiable report for the Director.
  - You can reach the SHARE website link through the BEMS website.
  - Soon there will be a direct website called [www@az.share.gov](http://www@az.share.gov).
  - The goal is to have a web-based database.
  - A packet containing a draft letter to EMS providers regarding the Share Program and data forms was distributed at the meeting.
  - We are in the process of working on an on-line system with a secure database.
  - The data form can be faxed or e-mailed to Lani Clark.
  - Develop a citizen-based framework for teaching CPR, and public access defibrillation, public interest and awareness

- We would be the only state to participate in this program on a statewide basis.
- Your feedback and suggestions/comments regarding the program are welcome.
- It was recommended that as this program is developed, we could work towards providing agencies with the ability to submit data from a software program.

**E. Report on Mesa Fire Department's Centralized Medical Direction Commissions Center Project (a copy of the PowerPoint presentation is available through the Bureau).**

- Kenny King, EMS Deputy Chief, Mesa Fire Department (MFD) reported that they had met with the former Bureau Chief, Judi Crume, and staff in December 2003. MFD received DHS approval for funding for a Central Medical Direction (CMD) demonstration project that was to take place for a period of three months. Implementation of the project began June 28, 2004. Project end date was scheduled for September 30, 2004. Both CMD models continued until October 30, 2004.
- The overall objective is to provide data for an assessment of the outcome of adopting a system of central medical direction and evaluate the effectiveness of two models establishing a CMD system. The first model established CMD at Mesa General Hospital (single hospital). The second model established CMD by means of Team Physicians of Arizona (physicians model) via City of Mesa Dispatch Center.

**F. Report on Status of Community and Hospital Preparedness Program's Regional Planning**

- Jane Wixted reported on the National Hospital Preparedness Program Grant: (please see attached copy).
- The grant has become an all-hazards approach
- Dr. Frank Walter provides the program medical direction
- In the process of working with:
  - Four EMS Regions
  - Regional Committees that are composed of hospital representatives
  - Local, County and Tribal Health Department
  - County Emergency Managers, Fire, EMS Managers and the Red Cross
  - Meet quarterly in each region to discuss how to move towards their regional planning programs
- Currently working with hospitals throughout the state to identify how they could provide alternate sites to increase their capacity to manage patients above and beyond their average daily staffed capacity
- Most hospitals are preferring to establish beds at their facility
- Dr. Walter, Dr. Lewis, and Dr. Kelly have identified a recommended list of drugs that will be provided to the hospitals, both antibiotics and chemical antidotes.
- The emphasis is on beds right now but will be moving towards staffing, equipment, and other things needed to complete alternate sites.
- Each hospital in the state will have eight sets of level C PPE
- The goal is to have all patients and providers decontaminated within three

hours of an event.

- The priority of this grant is hospital bioterrorism.

#### **VIII. EMERGENCY MEDICAL SERVICES COORDINATING SYSTEMS' REPORTS**

- A. Central Region** – AEMS will be having their EMS Symposium in June 2005. They are working on revising the AEMS Red Book.
- B. Southeastern Region** – The SAEMS Council meeting scheduled for January 25, 2005, has moved to the University Medical Center instead of Kino Hospital.
1. No Divert Pilot Project – The region is in the 5<sup>th</sup> month of the new-diversion policy. Transport volume seems to be up slightly, however out of service times are stable to trending down. The doctors are very pleased with the project. The project will continue into the busy time of the year.
  2. Cochise County Data Project - Taylor Payson distributed copies of the data collection project currently underway in Cochise County. (a copy is available through the Bureau). There are still a few bugs with the program, but for the most part, it is working well and has decreased billing turnaround time.
- C. Western Region** – The WACEMS Council meeting was held January 13, 2005. The Council has completed the previous federal fiscal year grant process for AEDs. A question was asked regarding an article that appeared in the Fire Rescue Magazine that stated that Congress has reappropriated funding away from AEDs. It was stated that this probably means the amount of the grant will be less than last year.
- D. Northern Region** – The NAEMS Council meeting was January 7, 2005. The Council is working on trying to make sure that tuition assistance that is utilized actually benefits the Northern Region. In the process of reviewing By-Law changes. The next meeting will be held March 4, 2005. Mark Venuti was re-elected as Vice-Chair and Gitti Silven as Treasurer. The Council allocated money for funding AEDs.

#### **IX. CALL TO THE PUBLIC**

No one came forward.

#### **X. SUMMARY OF CURRENTS EVENTS**

There were no announcements.

#### **XI. NEXT MEETING**

The next regular EMS Council meeting will be held on April 22, 2005.

#### **XII. ADJOURNMENT**

The meeting was adjourned at 12:55 p.m.

Approved by: Emergency Medical Services Council

Date: April 22, 2005